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Bib Data Sheet

CONFIRMATION NO. 9115

SERIAL NUMBER 09/901,852	FILING DATE 07/09/2001 RULE	CLASS 600	GROUP ART UNIT 3736	ATTORNEY DOCKET NO. 50230/002001	
APPLICANTS Michael O'Donnell, West Bloomfield, MI; ** CONTINUING DATA ***** <i>None</i> ** FOREIGN APPLICATIONS ***** <i>None</i> IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY ** ** 08/23/2001					
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged <i>John R. [Signature]</i> Examiner's Signature Initials		STATE OR COUNTRY MI	SHEETS DRAWING	TOTAL CLAIMS 6	INDEPENDENT CLAIMS 2
ADDRESS 21559					
TITLE Behavior change tool					
FILING FEE RECEIVED 420	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		



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CONFIRMATION NO. 9115

SERIAL NUMBER 09/901,852	FILING DATE 07/09/2001 RULE	CLASS 434	GROUP ART UNIT 3714	ATTORNEY DOCKET NO. 50230/002001
APPLICANTS Michael O'Donnell, West Bloomfield, MI; ** CONTINUING DATA ***** <i>JK me</i> ** FOREIGN APPLICATIONS ***** <i>JK me</i>				
IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY ** ** 08/23/2001				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged <i>Allowance</i> Examiner's Signature <i>[Signature]</i> Initials <i>[Initials]</i>		STATE OR COUNTRY MI	SHEETS DRAWING 0	TOTAL CLAIMS 6
INDEPENDENT CLAIMS 2				
ADDRESS 21559				
TITLE Behavior change tool				
FILING FEE RECEIVED 420	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	